Attorney Docket No.: 55729 (71526)

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John B. Alexan	nder, Ph.D.			
Typed or printed name of pe	erson signing Certificate			
48,399	(617) 439-4444			
Registration Number, if applicable	Telephone Number			

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Petition to Withdraw Application From Issue (RCE) (2 pages)
Petition Fee Transmittal (1 page)
Request for Continued Examination Transmittal (1 page)
RCE Fee Transmittal (1 page)
Information Disclosure Statement (2 pages)
IDS (Citation) by Applicant (7 References) (1 page)
Charge \$920.00 to deposit account 04-1105

PTO/SB/17 (12-04v2)
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Effec	L	Complete if Known									
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 09/787,196							
FEE TRANSMITTAL						April 26, 2001					
For FY 2005				First Named Inv							
<u> </u>		Examiner Name M. C. Henry									
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1623							
TOTAL AMOUNT OF PAYMENT         (\$)         920.00         Attorney Docket No.         55729 (71526)											
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
X Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards & Angell, LLP											
For the above-ide		· ·		· ·			•				
l	(s) indicated bel		50101 15 1			icated below, ex	rcent for t	he filing foe			
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X Charge any fee(s) unde	additional fee(ser 37 CFR 1.16	i) or underpaym and 1.17	ent of	x Credit	any overpa	yments					
FEE CALCULATION											
1. BASIC FILING, SEAR					=><						
		G FEES Small Entity	SEA	RCH FEES Small Entity	EXAMIN	ATION FEES Small Entity					
Application Type	Fee (\$)		Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees !	Paid (\$)			
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Plant	200 ·	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	0	0	0	0					
2. EXCESS CLAIM FEES	;						F (6)	Small Entity			
Fee Description	.dina Daiganga)						Fee (\$)	Fee (\$)			
Each claim over 20 (inclue Each independent claim of							50 200	25 100			
Multiple dependent claim		g Reissues)					360	180			
• •		ee (\$)	Fee Pa								
- 20 =				Fee (\$) Fee Paid (\$)							
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		ee (\$)	Fee Pa	id (\$)							
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3. APPLICATION SIZE F		1100 1	,	1.0	. 11 61	1					
If the specification and of listings under 37 CFI								1			
sheets or fraction the					or silium cin	101 00011 00	unional se	<b>^</b>			
Total Sheets	Extra Sheets	Number of	each add	itional 50 or frac	tion thereof	Fee (\$)	Fee f	Paid (\$)			
100 =		/50	(r	ound up to a whol	e number) x	=					
4. OTHER FEE(S)							<u>Fees</u>	Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00											
1464 Petition Fees under 37 CFR 1.17(h 130.00											
SUBMITTED BY	100	//									
Signature	101.16	1		egistration No. ttorney/Agent)	48,399	Telephone	(617) 439	3-4444			
Name (Print/Type) John B.	Alexander, Ph	1 D		nomey/Agent)		Date	May 10,	2005			
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Dated: May 10, 2005 Signature: ////////////////////////////////////											